

Exhibit No.

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Date

2-2-2009

Bill No.

SB, 74

Montana Spine and Pain Center  
Saint Patrick Hospital and Health Sciences Center  
500 West Broadway  
Missoula, Montana 59802

February 2, 2009

Members of the Committee:

For the record my name is Dr. Randale C. Sechrest. I currently practice medicine in Missoula as the Medical Director of the Montana Spine and Pain Center at Saint Patrick Hospital and Health Sciences Center. I am here today representing myself and stand in support of HB 174.

Montana Spine and Pain Center has provided services to patients suffering from complex spine and pain disorders at Saint Patrick Hospital and Health Sciences Center. Over the past 6 years, we have utilized the clinical services provided by clinical pharmacist practitioners as a normal part of the health care delivery team. The providers - and patients - at the Montana Spine and Pain Center have come to greatly value the expertise provided by these professionals.

***Simply put, the services provided through the Montana Spine and Pain Center are greatly enhanced by the inclusion of the clinical pharmacist practitioner.***

Today, health care is in transition. No longer is it realistic for the individual physician to claim mastery all aspects of medicine. The knowledge required to provide health care to patients in our increasingly complex medical world exceeds the capabilities of a sole individual.

***Complex health care problems increasingly require a team approach, where each team member contributes a specific expertise to the endeavor of caring for each individual patient.***

My experience in working with clinical pharmacists has convinced me that under the right conditions, with the right collaborative practice arrangement, the partnership can provide better, more effective health care delivery.

Access to health care is a critical problem for many patients across Montana. This problem is clearly more acute in our rural areas, but access to health care remains a problem in urban areas as well. We face a continued relative shortage of physicians in Montana to serve an increasingly aging population with complex chronic disease man-

agement challenges. Meeting this need in the traditional fashion – assuming that these patients will be best served by simply visiting a physician is simply not realistic.

***The ability to extend the capacities of physicians by delegating appropriate responsibilities to mid level practitioners, such as family nurse practitioners, physician assistants and clinical pharmacists can significantly improve this situation.***

Thank you for your time and your consideration of HB 174.

Sincerely,

Randale C. Sechrest, MD